



## ORGANIC NON-RUMINANT LIVESTOCK SYSTEM PLAN

This form is to be completed by operators who wish to include non-ruminant livestock production in their organic system. Non-ruminant animals include, but are not limited to, poultry, swine or other single stomached animals. Because many organic non-ruminant livestock producers also grow organic crops such as vegetables or fruit, this form needs to be completed in conjunction with the Organic Cropping System Plan. All forms are included in this packet. In addition, if you also raise ruminant livestock such as beef or dairy cows, you must complete an Organic Ruminant Livestock System Plan (AGR 2254). If you have questions regarding the forms, please call the Organic Food Program at (360) 902-1805 or email at organic@agr.wa.gov.

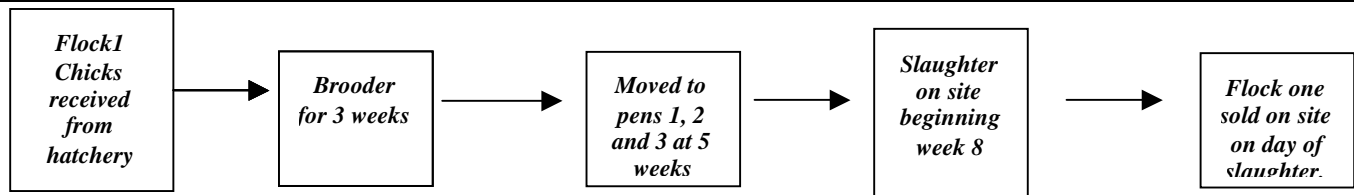
BUSINESS NAME:

WSDA ORGANIC CERTIFICATION NUMBER (RENEWAL APPLICANTS ONLY):

COUNTY WHERE BUSINESS IS LOCATED:

STATE WHERE BUSINESS IS LOCATED:

**SECTION A. FLOW CHART** Please provide information regarding the flow of animals through your system. This may be in a narrative form or submitted as a flow chart. Attach additional sheets as necessary. Refer to the example below:



1. Please use the space below for the flow chart of your operation:

2. Use the space below for additional narrative:

**SECTION B. ORIGIN OF LIVESTOCK [205.236]** National Organic Standards require that livestock products intended for sale as organic must be from livestock under continuous organic management from the last third of gestation. Except, that: poultry must be under continuous management from the second day of life.

1. Do you purchase replacement animals? ☐ Yes ☐ No ☐ N/A

2. Please list all sources of replacement animals in the table below:

Type of Animal	Source (Name, Address or Phone)	Organic (X)	Receipt on file? (yes or no)
Piglets	Jack's Pigs 555-2030	X	yes



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3. Do you breed livestock or hatch chicks on farm?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3a. If "Yes," please describe breeding and/or hatching program in the space provided below:			
4. Have all slaughter animals (except poultry) been under contiguous organic management since the last third of gestation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. Have all poultry been under continuous organic management since the 2 <sup>nd</sup> day of life?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

**SECTION C. ORGANIC FEED RATIONS [205.237]** The National Organic Program requires that livestock producers provide slaughter and dairy livestock with a total feed ration composed of 100% organic agricultural products, including pasture and forage. This feed ration must be sufficient to meet nutritional requirements, including vitamins, minerals, protein and/or amino acids, fatty acids, energy sources and fiber for ruminants.

1. Provide the following information for the types of animals being raised for organic meat or dairy production. An example is provided for clarification. Attach additional paper if necessary.

FEED RATION							
Type of Livestock	# of Animals	TYPE OF FEED			AMOUNT OF FEED/UNIT OF TIME		
		Grain	Forage	Other	Grain	Forage	Other
Ex- Sows	14	Pig Ration	None	Kitchen waste	10#/day	None	Free – fed

2. Is all feed Certified Organic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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3. List all vitamins and supplements in the table below. Please include mineral mixes, enzymes, electrolytes or minerals given to organic Animals (you do not have to include supplements and additives premixed into purchased Certified Organic Feed).

Name of Supplement or Additive	Method of Administration (I.V., oral, etc)	Amount	Reason
Ex – Chicolyte	Orally administered	1 pouch per waterer	Electrolytes for optimal health



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**SECTION D. DISEASE AND PEST CONTROL [205.238]** National Organic Standards 205.238(a) requires that livestock producers establish and maintain preventative livestock health care practices. When preventative practice and veterinary biologics are inadequate to prevent sickness, a producer may administer synthetic medications allowed under 205.603 (Synthetic Substances Allowed for Use in Organic Livestock Production). Any medications administered, whether allowed or prohibited, must be recorded on an animal health record.

1. List the diseases and/or pests that have afflicted your animals, identify the specific ailment, describe treatment methods and the preventive plan that is implemented. Please fill out the table which is appropriate for your production: mammalian or poultry.

### Mammalian Disease Control

Disease/Pest/Behavioral Pattern	Preventative Plan	Treatment (if prevention fails)
External parasites		
Internal parasites		
Diarrhea (scours, coccidiosis, etc)		
Eye problems		
Hoof or foot problems		
Mouth or tooth problems		
Respiratory disease		
Skin problems (sunburn, ringworm, etc)		
Flies		
Cannibalism		
Farrowing problems		
Other: (specify)		

### Poultry Disease Control

Disease/Pest/Behavior Pattern	Preventative Plan	Treatment (if prevention fails)
Diarrhea (coccidiosis, Salmonellosis)		
Foot problems (mareks, etc.)		
Internal parasites		



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External parasites		
Respiratory diseases		
Skin or feather problems		
Heart attacks		
Cannibalism		
Influenza		
Other: (specify)		

2. If a sick animal does not respond to treatment, what is your next course of action?


3. If an animal is treated with a prohibited material, how is the final product (including treated animals) prevented from entering the organic market? Please answer in the space provided below:


4. Do you vaccinate your organic animals?

☐ Yes

☐ No

☐ N/A

4a. If yes, please provide the following information in the table below:

Name of Vaccination (be specific)	Purpose of Vaccination	At what age are animals vaccinated?



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5. Are animals subject to physical alterations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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5a. If "Yes," please provide the following information in the table below:

Physical Alteration	Animal ID	Why was the alteration performed?	How was pain and stress minimized?
Ex – Ear notched	Piglets	Animal identification	Performed at young age

**SECTION E. LIVESTOCK LIVING CONDITIONS – [NOP 205.239]** Organic livestock operators are required to establish and maintain livestock living conditions which accommodate the health and natural behavior of animals.

1. Please indicate which of the following accommodations are provided for your organic livestock:

- |                                    |  |  |
|------------------------------------|--|--|
| <input type="checkbox"/> Outdoors  | <input type="checkbox"/> Shade           | <input type="checkbox"/> Exercise area |
| <input type="checkbox"/> Fresh air | <input type="checkbox"/> Direct sunlight | <input type="checkbox"/> Other:        |

2. Do you provide pasture to any animals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. Is the pasture certified organic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Is shelter available for organic animals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

4a. If "Yes," does the shelter provide the following conditions:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Natural maintenance               | <input type="checkbox"/> Comfort behaviors | <input type="checkbox"/> Opportunity for exercise |
| <input type="checkbox"/> Suitable temperature levels       | <input type="checkbox"/> Ventilation       | <input type="checkbox"/> Air circulation          |
| <input type="checkbox"/> Reduction of potential for injury |  |   |

5. Do you provide bedding for your animals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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5a. If "Yes," please list bedding:

5b. Is it edible?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5c. Is it organic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6. Are organic animals subject to confinement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

6a. If "Yes," please indicate why livestock are subject to confinement:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Inclement weather     | <input type="checkbox"/> Stage of production | <input type="checkbox"/> Health, safety or well being of animal |
| <input type="checkbox"/> Risk to soil or water | <input type="checkbox"/> Other:              |   |

7. Please describe any additional management practices that you implement which accommodate the health and natural behavior of the specific species you raise (*Ex – farrowing pens provide safety and comfort for sows and piglets*)




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**Section F. Recordkeeping [205.103]** Organic producers are required to maintain records concerning the production, harvesting and handling of organic livestock and livestock products. These records must fully disclose all activities and transactions of the operation in sufficient detail to be readily understandable and auditable and must be available for inspection and copying. These records must be sufficient to demonstrate compliance with the act and must be maintained for not less than five (5) years.

1. Please check the method of animal identification that you use on the farm:

☐ Ear Tag      ☐ Ear Notch      ☐ Brand      ☐ Flock      ☐ Other:

2. Do you maintain receipts for all purchased livestock? ☐ Yes ☐ No ☐ N/A

3. Do you maintain receipts for materials used on on-site forage production (seed receipts, purchased fertility inputs, etc.)? ☐ Yes ☐ No ☐ N/A

4. Do you maintain the following records:

4a. Weight records of animals at slaughter ☐ Yes ☐ No ☐ N/A

4b. Synthetic medications administered (date, dosage, animal ID) ☐ Yes ☐ No ☐ N/A

4e. Herbal remedies, natural remedies or other approved materials given to organic animals ☐ Yes ☐ No ☐ N/A

4d. Vitamins, minerals or other materials administered for preventative health care ☐ Yes ☐ No ☐ N/A

4f. Receipts for purchased feed products ☐ Yes ☐ No ☐ N/A

5. Are these records maintained for five years? ☐ Yes ☐ No ☐ N/A

6. Please list additional records that you maintain which verify compliance with National Organic Standards? Use the space provided below for further explanation

**SECTION G: SLAUGHTER AND EGG HANDLING [205.236, 205.237, 205.238, 205.239]** Slaughter stock must be under continuous organic management from the last third of gestation and comply with all feed, health care and living condition requirements.

1. Do you slaughter organic animals for organic livestock products? ☐ Yes ☐ No ☐ N/A

1a. If "Yes," please list the slaughter facility that you use to process your livestock:

Business Name:

Address:

Phone Number:

2. All slaughter animals intended to be sold as "organic" must be processed at a certified organic slaughter facility. Please list the certification agency who certifies this facility:



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3. Do you have your animals processed at a separate cut and wrap or processing facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3a. If "Yes," please list the cut and wrap facility and/or processing facility that you use to process your organic meat products:			
Business Name:			
Address:			
Phone Number:			
4. All slaughter animals intended to be sold as "organic" must be processed at a certified organic slaughter facility. Please list the certification agency who certifies this facility:			
<i>**Please note that if you are slaughtering and butchering your livestock at your own facility, you must also complete an Organic Processor/Handler System Plan**</i>			
5. Do you raise poultry for egg production?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5a. If "Yes," do you have an WSDA Egg Handlers License?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6. Are you a certified organic egg handler?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6a. If "No," please describe your egg handling procedures in the space below:			

**THE NATIONAL ORGANIC PROGRAM REQUIRES A SYSTEM PLAN UPDATE EACH YEAR.  
PLEASE KEEP A COPY OF THIS SYSTEM PLAN AS A REFERENCE FOR UPDATING YOUR  
PRODUCTION PLAN IN FUTURE**